CSC Form No. 211 (Revised August 1998)

MEDICAL CERTIFICATE

For Employment

	INSTRUCTIONS				
 This medical certificate should be Attached this certificate to origin 					
NAME (Last, First, Middle, or if married woman, Maiden Name)		AGENCY ADDRESS			-
GILOS, VICENTE A GUILAR ADDRESS 108 Warner Spartment, VSU, Boy boy		VSV			
108 Warner Spartment	- VSU, Boy bay				
AGE SEX MALE	CIVIL	PROPOSED POSITION			
Pre-Employ	ment Medical-Physica	al Tests			-
	chiatric Examination (/	f necessary	1)		
I HEREBY CERITIFY that I have person individual and found her/him to be physical employment	nally examined the abov	re-named fit for	00	Documentary Stamp	
JOSEPHINE O. ZAFICO, M.D. Medical Officer III License No. 075699 CERTIFICATE NO.		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE			
OFFICIAL DESIGNATION IN \$35		HEIGHT (Baseloot)	WEIGHT (Stripped)	BLOOD TYPE	13
ACENCS		159cm	69.649	0	
AGENCY: VSU HOSPITAL Visayas State Universi Visca, Baybay, Leyte, Phil		DATE EXAM	MINED		